

Michigan Department of History, Arts & Libraries
Michigan Council for Arts and Cultural Affairs

PO Box 30705
Lansing, MI 48909-8205



**Final Grant Report
Fiscal Year 2009**

Grant Control # _____

Due Date _____

Indicate below, the dates of the grant period covered by this report.

Granting Period: From _____ To _____

The **Grant Agreement for Arts Services** requires reporting of grant activities. Review your agreement, sections 3 and 16, and this form for specific grant reporting requirements. The grant report is used by the Council for grant agreement monitoring, project evaluation, and research. Grant agreement payment will not be processed until the required grant report is officially received and approved.

Please type, sign and return the report by the due date as stipulated in your grant agreement.

SECTION 1

ORGANIZATION INFORMATION

Provide current information in the space below. If the information has changed since you contracted with the Council, please attach an explanation.

Organization Name: _____

Address: _____
street city state zip code

Telephone Number: _____ **Office Hours:** _____

Authorizing Official: _____ **Title:** _____

Board Chairperson: _____

Project Director: _____ **Telephone:** _____
(contact person)

SECTION 2

CONTRACT STATUS

Check the box which best describes the current status of Contract implementation. Explain substantive Contract or project implementation changes in Section 4 of this form. If you are checking numbers 2, 4, 5, or 6, contact Council staff immediately at 517.241.4011, prior to submission of the Grant Report.

Status

1. ☐ Contract completed. Met required grant match.
2. ☐ Contract completed. Did not meet required grant match.
3. ☐ Contract completed. Project was implemented with changes. (see section 4.)
4. ☐ Contract not completed. Project is being implemented as planned.
5. ☐ Contract not completed. Project is being implemented with changes.
6. ☐ Contract modified/cancelled. Grant funds are being returned.

A check, in the amount of \$ _____ made payable to the **State of Michigan**, is enclosed.

SECTION 3

SUMMARY INFORMATION

Provide actual grant activity data as requested.

Section 3a FINANCIAL SUMMARY (FIGURES FROM SECTION 7: FINANCIAL STATEMENT)

total earned revenue from line 4	total cash revenue from line 17	total cash expenses from line 32	
total unearned revenue from line 13	total in-kind support from line 18	total in-kind expenses from line 33	
cash match from line 20	total revenue from line 19	total expenses from line 34	council award from line 16 a + 16 b

NOTE

Please remember to include a self-generated itemization for each number reported in Section 7: Financial Statements.

Section 3b: Project Participation Summary

Total number of Michigan artists participating	Total paid to Michigan artists
Total number of artists participating	Total paid to artists
Total number of individuals benefiting	Total number of youth benefiting
Total number of new hires	Total number of employees

SECTION 4

AGREEMENT / PROJECT IMPLEMENTATION CHANGES

(Attach additional pages as necessary)

SECTION 5

NARRATIVE SUMMARY AND OUTCOMES

(Attach additional pages as necessary)

SECTION 6

PROMOTION AND ASSESSMENT/RESEARCH

Section 6a

Legislative Contact

PLEASE EXPLAIN WHEN AND HOW EACH LEGISLATOR WAS CONTACTED (Attach additional pages as necessary)

Section 6b

Promotion & Acknowledgement of MCACA support

(Attach additional pages as necessary)

SECTION 7a - REVENUES FINANCIAL STATEMENT

The financial statement must include all revenues and expenses for your funded project. Round all numbers to whole dollars. **Every statement number entered must be thoroughly explained in an itemization.**

REVENUES-----Earned		CASH	IN-KIND
1. Admissions			
2. Contracted services			
3. Other			
4. Total earned revenue add lines 1,2 & 3. copy the total to Section 3a			
REVENUES-----Unearned			
5. Corporate support			
6. Foundation support			
7. Other private support			
8. Federal support			
9. Regional support			
10. Local government support			
11. Other unearned revenue			
12. Applicant cash			
13. Sub-total unearned revenue add lines 5 -through- 12			
14. State support -not from Council			
15. Total unearned revenue add lines 13 & 14. copy the total to Section 3a			
16a. MCACA grant received to date Copy to Section 3a			
16b. Grant due enter grant amount still due from MCACA			
17. Total cash revenue add lines 4, 15, 16a & 16b. copy the total to Section 3a			
18. Total in-kind support -from line 33 Copy the total to Section 3a			
19. Total revenues add lines 17 & 18. Copy the total to Section 3a			

Determine if your activity resulted in a surplus or a deficit by subtracting the total cash expenses from total cash revenues.

- 20a. Enter cash match add lines 4 & 13 _____
- 20b. Enter total cash revenues from line 17 _____
- 20c. Enter total cash expenses from line 32 - _____
- 20d. Surplus or deficit (20b minus 20c) = _____

SECTION 7b - EXPENSES**FINANCIAL STATEMENT**

The financial statement must include all revenues and expenses for your funded project. Round all numbers to whole dollars. **Every statement number entered must be thoroughly explained in an itemization.** Carefully check the completed Financial Statement for typos and math errors before submission.

Applicant Name:			
EXPENSES	CASH	IN-KIND	MCACA dollars
21. Administrative employees			
22. Artistic employees			
23. Technical/production employees			
24. Artistic fees/services -non-employee			
25. Other fees/services - non-employee			
26. Space rental			
27. Travel			
28. Marketing, publicity & promotion			
29. Other expenses			
30. Capital expenses - acquisitions			
31. Capital expenses - other			
32. Total cash expenses add lines 21 through 31. copy the total to Section 3a			
33. Total in-kind expenses add lines 21 through 31. copy the total to line 18 and to Section 3a			
34. Total expenses add lines 32 & 33. copy the total to Section 3a			

Certification

I hereby certify that this report is accurate.

Authorizing Official

Signature

Date

FINAL REPORT CHECKLIST:

- ☐ Completed final report forms.
- ☐ Signature of authorizing official on financial statement.
- ☐ Detailed financial statement itemization attached.
- ☐ Appropriate documentation included.
- ☐ **KEEP A COPY FOR YOUR FILES !**

MAIL TO: Administration
Michigan Council for Arts and Cultural Affairs
702 West Kalamazoo P.O. Box 30705
Lansing, MI 48909-8205